

**POWER OF ATTORNEY  
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INDICATION FORM**

<b>Application Number</b>	Patent No. 6,962,818
<b>Filing Date</b>	November 8, 2005
<b>First Named Inventor</b>	Schneider, Luke V.
<b>Title</b>	MASS DEFECT LABELING FOR THE DETERMINATION OF OLIGOMER SEQUENCES
<b>Art Unit</b>	1634
<b>Examiner Name</b>	Bradley L. Sisson
<b>Attorney Docket Number</b>	020444-000710US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

**20350**

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Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Signature

Date

Name

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Title and Company

Chief Executive Officer of Target Discovery, Inc.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.